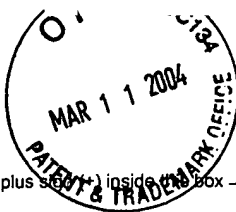


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PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

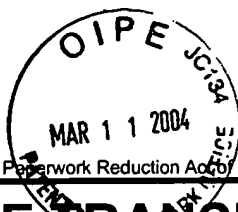
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 5px 0;">(to be used for all correspondence after initial filing)</p>		Application Number	09/843,159			
		Filing Date	April 25, 2001			
		First Named Inventor	LUO, YING			
		Group Art Unit	1652			
		Examiner Name	RAO, MANJUNATH N.			
Total Number of Pages in This Submission 14 + Exbts		Attorney Docket Number	RIGL-010CIP2			
ENCLOSURES (check all that apply)						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; vertical-align: top;"> <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;"> 1. Exhibits A-D 2. Postcard </div> </td> </tr> </table>				<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;"> 1. Exhibits A-D 2. Postcard </div>
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;"> 1. Exhibits A-D 2. Postcard </div>				
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Remarks</div>						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Signing Attorney/Agent (Reg. No.)	JAMES S. KEDDIE, PH.D., 48,920 BOZICEVIC, FIELD & FRANCIS LLP					
Signature						
Date	March 10, 2004					
EXPRESS MAIL LABEL NO. EV333997940US						

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

Application Number	09/843,159
Filing Date	April 25, 2001
First Named Inventor	LUO, YING
Examiner Name	RAO, MANJUNATH N.
Art Unit	1652
Attorney Docket No.	RIGL-010CIP2

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

55

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit

Account

Number

50-0815

Deposit

Account

Name

Bozicevic, Field & Francis LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge Any Additional Fee(s) Required under 37 C.F.R. 1.17.☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee

Fee Paid**SUBTOTAL (1)****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	x	=
Indep. Claims	-3** =	x	=
Multiple Dependent			=

Large Entity Small Entity

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Fee Description

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

** Reissue independent claims over original patent

** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$

**or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$)

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Fee Description

Surcharge - late filing fee or oath

Surcharge - late provisional filing fee or cover sheet

Non-English specification

For filing a request for *ex parte* reexamination

Requesting publication of SIR prior to Examination action

Requesting publication of SIR after Examiner action

Extension for reply within first month

Extension for reply within second month

Extension for reply within third month

Extension for reply within fourth month

Extension for reply within fifth month

Notice of Appeal

Filing a brief in support of an appeal

Request for oral hearing

Petition to institute a public use proceeding

Petition to revive - unavoidable

Petition to revive - unintentional

Utility issue fee (or reissue)

Design issue fee

Plant issue fee

Petitions to the Commissioner

Processing fee under 37 CFR 1.17(q)

Submission of Information Disclosure Stmt

Recording each patent assignment per property (times number of properties)

Filing a submission after final rejection (37 CFR § 1.129(a))

For each additional invention to be examined (37 CFR § 1.129(b))

Request for Continued Examination (RCE)

Request for expedited examination of a design application

Other fee (specify)

Terminal Disclaimer fee 37 CFR 1.20(d)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)

James S. Keddie, Ph.D.

Registration No. (Attorney/Agent)

48,920

Telephone

(650) 833-7723

Signature

Date

03/10/2004

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DATE: March 10, 2004

EV333997940US

THE EXPRESS MAIL NUMBER OF THE DAY IS: EV333997940US

The person taking the Express Mail to the Post Office is: Stuart McLeish

EXPRESS MAIL CERTIFICATION

Date of Deposit: 03/10/2004 I hereby certify that the below-listed papers or fees were inserted into a package addressed to: Commissioner for Patents, PO BOX 1450, Alexandria, Virginia 22313-1450 and was deposited by me with the United States Postal Service "Express Mail Post Office Addressee" service under 37 C.F.R. § 1.10 on the date indicated above.

Signature

Date

3/10/04

Atty. Docket No.	Serial Number	Description	Atty.	Fee
RIGL-010CIP2	09/843,159	Transmittal, Fee Transmittal <i>in duplicate</i> , Amendment, Terminal Disclaimer, Exhibits A-D	JSK	\$55
YAMA-009	10/759,788	Transmittal, IDS, SB08A	SCT	
IRVN-009CON	10/661,105	Transmittal, IDS, SB08A	CLF	